

partially shipped 12-12-20 S/O 109183

Work Order ID 87083

87083

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Item ID: D350-616-011 Accept *N900040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: Emergency Litter
Start Date: 7/10/12 Start Qty: 1.00 *1* Cust Item ID:
Required Date: 8/17/12 Req'd Qty: 1.00 *1* Customer:
Reference:

Approvals: Process Plan: P Date: 120711 Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
Run Start *NR1*
Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
d350-616	E								
100		0.00							
100									
DC		0.00							
Document Control	Memo Photocopy bluefile and create labels per PPP D350-616-011 CHG004								
110	Pick Kit	0.00							
110									
Packaging		0.00							
Packaging	Memo								
120	QC4- 100% Inspect kits for completeness	0.00							
120									
QC		0.00							
Quality Control	Memo								

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

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Item ID: D350-616-011

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Emergency Litter

Start Date: 7/10/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D350-616-011								
	Location: _____								
	PPP Rev: _____								
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

QD Z 13/01/09 DAS 06 9-83

MCS 13-01-09

MF 13-01-09

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W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

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Work Order ID: 87083

Parent Item: D350-616-011

Start Date: 7/10/12

Required Date: 8/17/12

Parent Item Name: Emergency Litter

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP E03.04.04ReformatKJ/RF
IPP Rev:F 08-12-10 rev.E as per dwg DD verified by:ec

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2370 Litter Assembly		Manufactured	No				Each	0.0000		1 84397			
D2493 Patient Stop Assembly		Manufactured	No				Each	0.0000		1 83810			
D350-616-013 Deck Plate and Tie Down		Manufactured	No				Each	0.0000		1			

ship this
item 12-12-20
balance to follow

SM
12-12-20

89119

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries